

*TCW*

RECEIVED  
OCT 21 2004

TRANSMITTAL LETTER  
(General - Patent Pending)

Docket No.  
MCAJ102CIP

In Re Application Of: MCALPINE

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/624,202	07/21/03	PHILLIPS	21,658	3751	7727

Title: WASTE TRAP

COMMISSIONER FOR PATENTS:

Transmitted herewith is:

**COPY OF NOTICE OF FEE DEFICIENCY  
RETURN RECEIPT POST CARD**

in the above identified application.

- No additional fee is required.  
 A check in the amount of \$54.00 is attached.  
 The Director is hereby authorized to charge and credit Deposit Account No. as described below.
- Charge the amount of  
 Credit any overpayment.  
 Charge any additional fee required.
- Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

*[Signature]*  
Signature

DEREK H. MAUGHAN  
DYKAS, SHAVER & NIPPER, LLP  
PO BOX 877  
BOISE, ID 83701  
208-345-1122  
REG. NO. 52,007

10/22/2004 MMKONEN 00000018 10624202

01 FC:2202

54.00 OP

CC:

Dated: 10/18/04

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

10/18/04

(Date)

*Shannon M. Wilson*  
Signature of Person Mailing Correspondence

SHANNON M. WILSON

Typed or Printed Name of Person Mailing Correspondence



Paper No.

## NOTICE OF FEE DEFICIENCY

The informality regarding the payment of the fee is indicated below in connection with

- the original filing of the application and/or preliminary amendment (e.g. additional claim fees)
- the reply filed on \_\_\_\_\_ because of the \_\_\_\_\_ following matter(s). See 37 CFR 1.111 and 37 CFR 1.135.
- . The reply is not fully responsive to the prior Office action

### FEE(S) DUE

1. The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No. \_\_\_\_\_ are insufficient to cover the entire fee due. The balance\* is due within the time period set below.
2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due to Account \_\_\_\_\_ (Card type + last 4 digits ONLY) was refused.

The balance\* is due within the time period set below.

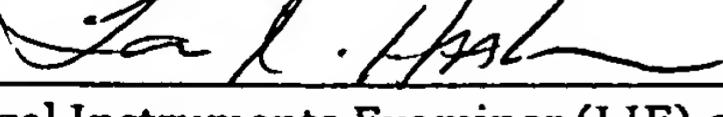
3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the time period set below.
4. The filing fee of \$ \_\_\_\_\_ submitted in this application is insufficient. A balance of \$ \_\_\_\_\_ is due for presentation of excess claims (37 CFR 1.16(b) & (c)).
5. Other.

Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service charge has been added to the fee due):  
\_\_\_\_\_  
\_\_\_\_\_

APPLICANT IS GIVEN A TIME PERIOD OF ONE (1) MONTH or THIRTY (30) DAYS FROM THE MAILING DATE OF THIS NOTICE, WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FEE ~~\$54.00~~ IN ORDER TO AVOID ABANDONMENT. EXTENSIONS OF THIS TIME PERIOD MAY BE GRANTED UNDER 37 CFR 1.136.

THE INDICATED AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE YEARLY ON OCTOBER 1 (37 CFR 1.16 & 1.21). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS NOT NECESSARILY THE FEE INDICATED ABOVE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS POSTED ON THE USPTO'S WEBSITE AT: <http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm>

\*Service Charges: There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

  
Legal Instruments Examiner (LIE) or Clerk of Group

Inquires regarding this Notice should be addressed to the above at

103-308-1333

(insert Phone Number).